



Attorney's Docket No.: 006404.P013

 Patent

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of: )  
Gek Hoon Quat, et al. )  
Application No.: 10/734,710 ) Examiner: Not Yet Assigned  
Filing Date: December 12, 2003 ) Art Unit: Not Yet Assigned  
For: CONNECTION FOR AUDIO )  
TRANSFER )  
\_\_\_\_\_  
)

Mail Stop Petitions  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**PETITION ASSERTING SUBMISSION OF FILING DOCUMENTS**

This is a petition to rescind the Notice of Incomplete Nonprovisional Application filed under 37 CFR § 1.53(b) which was mailed to Applicant on March 30, 2004. Applicant believes the Notice of Incomplete Nonprovisional Application was mailed in error according to the facts listed below and the attached documents.

1. On December 12, 2003, Applicant filed a Utility Patent Application. The application package included a Utility Application Transmittal (in duplicate), a Fee Transmittal (in duplicate), the application (specification) (10 pages), drawings (four sheets), a Declaration and Power of Attorney signed by the inventors, an Assignment signed by the inventors and an appropriate cover sheet, our Check Nos. 61710 and 61711 in the amounts of \$896.00 and \$40.00 in payment for the application filing fee and assignment recordation fee, respectively, and a return receipt postcard. The attorney

for Applicant carefully checks each set of application documents being sent to the U.S. Patent Office to ensure that all documentation is enclosed before it is put into the Express Mail envelope.

2. The Express Mail Receipt for this application was dated by the U.S. Postal Service as being received on December 12, 2003 (please see "Date In" box on the Express Mail Receipt). In addition, the postcard that accompanied this application was date-stamped by the Patent Office mail room as being received on December 12, 2003 and the serial number of 10/734,710 was assigned to this application. The date-stamped postcard includes the item noted as "Application – Utility (10 pgs., with cover sheet and abstract)." Please note that the Express Mail Airbill Number "EV 336589202 US" is the same number that appears on the postcard and also on the Utility Patent Application transmittal form. A copy of the Express Mail Receipt and a copy of the return receipt postcard with the serial number sticker are attached hereto as Exhibits A and B.

3. Nearly four months later, Applicant has now received a Notice of Incomplete Nonprovisional Application for Serial No. 10/734,710 which was mailed from the Patent Office on March 30, 2004. The Notice indicates that the specification is missing, and that the original filing date has not been accorded to these application papers. A copy of the Notice of Incomplete Nonprovisional Application is attached hereto as Exhibit C.

Applicant petitions the Patent Office to rescind the Notice of Incomplete Nonprovisional Application and to reinstate the original filing date of December 12, 2003. It is clear from the attached documents that Applicant filed the Utility application with the specification enclosed, and the specification has apparently been misplaced

during processing by the Patent Office. Enclosed in response to a telephone call with the Patent Office today are duplicate copies of the specification and figures, as well as a check in the amount of \$130.00 in payment for the petition fee under 37 CFR § 1.17(h). According to the information received today, a new Declaration is not required with this Petition.

Applicant also requests a refund of the petition fee, as the application is entitled to the original filing date.

If there are any additional fees, please charge them to Deposit Account 02-2666.

If you have any questions, please contact the undersigned.

Respectfully submitted,

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP



\_\_\_\_\_  
Stephen M. De Klerk  
Reg. No. 46,503

Dated: April 6, 2004

12400 Wilshire Boulevard  
Seventh Floor  
Los Angeles, California 90025  
(408) 720-8300

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First-Class Certificate of Mailing

I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail with sufficient postage in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia, 22313-1450 on:

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April 6, 2004

Date of Deposit

---

Linda K. Brost

Name of Person Mailing Correspondence

---

Linda K. Brost  
Signature

---

April 6, 2004  
Date



# UNITED STATES PATENT AND TRADEMARK OFFICE

# Exhibit C

UNITED STATES DEPARTMENT OF COMMERCE  
United States Patent and Trademark Office  
Address: COMMISSIONER FOR PATENTS  
PO Box 1450  
Alexandria, Virginia 22313-1450  
www.uspto.gov

APPLICATION NUMBER	FILING OR 371 (c) DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
10/734,710	12/12/2003	Gek Hoon Quat	006404.P013

Stephen M. De Clerk  
BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP  
Seventh Floor  
12400 Wilshire Boulevard  
Los Angeles, CA 90025



CONFIRMATION NO. 2360

## FORMALITIES LETTER



\*OC000000012220263\*

Date Mailed: 03/30/2004

## NOTICE OF INCOMPLETE NONPROVISIONAL APPLICATION

### FILED UNDER 37 CFR 1.53(b)

A filing date has NOT been accorded to the above-identified application papers for the reason(s) indicated below.

All of the items noted below and a newly executed oath or declaration covering the items must be submitted within **TWO MONTHS** of the date of this Notice, unless otherwise indicated, or proceedings on the application will be terminated (37 CFR 1.53(e)). Replies should be mailed to: Mail Stop Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria VA 22313-1450.

The filing date will be the date of receipt of all items required below, unless otherwise indicated. Any assertions that the item(s) required below were submitted, or are not necessary for a filing date, must be by way of petition directed to the attention of the Office of Petitions accompanied by the \$130.00 petition fee (37 CFR 1.17(h)). If the petition states that the application is entitled to a filing date, a request for a refund of the petition fee may be included in the petition. Petitions should be mailed to: Mail Stop Petitions, Commissioner for Patents, P.O. Box 1450, Alexandria VA 22313-1450.

- The specification is missing.  
*A complete specification as prescribed by 35 U.S.C. 112 is required.*

Replies should be mailed to: Mail Stop Missing Parts  
Commissioner for Patents  
P.O. Box 1450  
Alexandria VA 22313-1450

*A copy of this notice **MUST** be returned with the reply.*

Customer Service Center  
Initial Patent Examination Division (703) 308-1202

**PART 2 - COPY TO BE RETURNED WITH RESPONSE**



# Exhibit 1

 <b>EV 336589202 US</b>		<b>Customer Copy</b>	
		<b>UNITED STATES POSTAL SERVICE</b>	
<b>ORIGIN (POSTAL USE ONLY)</b>			
PO ZIP Code <b>95101</b>	Day of Delivery <input checked="" type="checkbox"/> Monday <input type="checkbox"/> Next Day <input checked="" type="checkbox"/> Second	Flat Rate Envelope <input checked="" type="checkbox"/>	Delivery Attempt <input checked="" type="checkbox"/> One delivery attempt will be made to the address listed on the label. If delivery is not made, the item will be returned to the post office. <input type="checkbox"/> Two delivery attempts will be made to the address listed on the label. If delivery is not made, the item will be returned to the post office.
Date (In 1000 format, Year) <b>10/10/04</b>	Time AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>	Postage <b>\$ 12.00</b>	Time <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM
Mo. Day <b>10/10</b>	AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>	Delivery Attempt <input checked="" type="checkbox"/> One delivery attempt will be made to the address listed on the label. If delivery is not made, the item will be returned to the post office. <input type="checkbox"/> Two delivery attempts will be made to the address listed on the label. If delivery is not made, the item will be returned to the post office.	Employee Signature <i>[Signature]</i>
Time AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>	AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>	Delivery Attempt <input checked="" type="checkbox"/> One delivery attempt will be made to the address listed on the label. If delivery is not made, the item will be returned to the post office. <input type="checkbox"/> Two delivery attempts will be made to the address listed on the label. If delivery is not made, the item will be returned to the post office.	Employee Signature <i>[Signature]</i>
AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>	AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>	Delivery Attempt <input checked="" type="checkbox"/> One delivery attempt will be made to the address listed on the label. If delivery is not made, the item will be returned to the post office. <input type="checkbox"/> Two delivery attempts will be made to the address listed on the label. If delivery is not made, the item will be returned to the post office.	Employee Signature <i>[Signature]</i>
Weight <b>0.25</b>	Int'l Alpha Country Code <b>CA</b>	COD Fee <input type="checkbox"/>	Insurance Fee <input type="checkbox"/>
No Delivery <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday	Acceptance Clerk Initials <b>BL</b>	Total Postage & Fees <b>\$ 12.00</b>	
<b>DELIVERY (POSTAL USE ONLY)</b>			
Delivery Attempt <input checked="" type="checkbox"/> One delivery attempt will be made to the address listed on the label. If delivery is not made, the item will be returned to the post office. <input type="checkbox"/> Two delivery attempts will be made to the address listed on the label. If delivery is not made, the item will be returned to the post office.	Time <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Employee Signature <i>[Signature]</i>	Employee Signature <i>[Signature]</i>
Mo. Day <b>10/10</b>	AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>	Delivery Attempt <input checked="" type="checkbox"/> One delivery attempt will be made to the address listed on the label. If delivery is not made, the item will be returned to the post office. <input type="checkbox"/> Two delivery attempts will be made to the address listed on the label. If delivery is not made, the item will be returned to the post office.	Employee Signature <i>[Signature]</i>
AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>	AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>	Delivery Attempt <input checked="" type="checkbox"/> One delivery attempt will be made to the address listed on the label. If delivery is not made, the item will be returned to the post office. <input type="checkbox"/> Two delivery attempts will be made to the address listed on the label. If delivery is not made, the item will be returned to the post office.	Employee Signature <i>[Signature]</i>
AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>	AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>	Delivery Attempt <input checked="" type="checkbox"/> One delivery attempt will be made to the address listed on the label. If delivery is not made, the item will be returned to the post office. <input type="checkbox"/> Two delivery attempts will be made to the address listed on the label. If delivery is not made, the item will be returned to the post office.	Employee Signature <i>[Signature]</i>
<b>NO DELIVERY</b> <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday <input type="checkbox"/> Other <input type="checkbox"/> Customer Signature <input type="checkbox"/> No Signature			
<b>TO: (PLEASE PRINT)</b> <b>BLAKELY, SOKULOFF, TAYLOR, ZAFMAN</b> <b>1279 BAKERSFIELD PKWY</b> <b>SUNNYVALE, CA 94085-4040</b> <b>006404.P013 SMD/1kb 12/12/2003</b> <b>18-338-008-1152</b>			
<b>FROM: (PLEASE PRINT)</b> <b>PHONE</b> <b>U.S. POSTAL SERVICE</b> <b>1-800-222-1811</b> <b>www.usps.com</b>			
<b>PRESS HARD.</b> <b>You are making 3 copies.</b>			
<b>FOR PICKUP OR TRACKING CALL 1-800-222-1811</b> <b>www.usps.com</b>			



# Exhibit B

Serial/Patent No.: Not Yet Assigned Filing/Issue Date: Herewith  
 Client: Creative Technology Limited  
 Title: CONNECTION FOR AUDIO TRANSFER

BSTZ File No.: 006404.P013 Atty/Secty Initials: SMD/1kb  
 Date Mailed: December 12, 2003 Docket Due Date: \*\*\*

The following has been received in the U.S. Patent & Trademark Office on the date stamped hereon:

<input type="checkbox"/> Amendment/Response (____ pgs.)	<input type="checkbox"/> Express Mail No.: <u>EV336589202US</u>	<input checked="" type="checkbox"/> Check No. <u>61710</u>
<input type="checkbox"/> Appeal Brief (____ pgs.) (in triplicate)	<input type="checkbox"/> _____ Month(s) Extension of Time	<input type="checkbox"/> Amt: <u>\$896.00</u>
<input checked="" type="checkbox"/> Application - Utility ( <u>10</u> pgs., with cover and abstract)	<input type="checkbox"/> Information Disclosure Statement & PTO-1449 (____ pgs.)	<input checked="" type="checkbox"/> Check No. <u>61711</u>
<input type="checkbox"/> Application - Rule 1.53(b) Continuation (____ pgs.)	<input type="checkbox"/> Issue Fee Transmittal	<input type="checkbox"/> Amt: <u>\$40.00</u>
<input type="checkbox"/> Application - Rule 1.53(b) Divisional (____ pgs.)	<input type="checkbox"/> Notice of Appeal	
<input type="checkbox"/> Application - Rule 1.53(b) CIP (____ pgs.)	<input type="checkbox"/> Petition for Extension of Time	
<input type="checkbox"/> Application - Rule 1.53(d) CPA Transmittal (____ pgs.)	<input type="checkbox"/> Petition for _____	
<input type="checkbox"/> Application - Design (____ pgs.)	<input checked="" type="checkbox"/> Postcard	
<input type="checkbox"/> Application - PCT (____ pgs.)	<input type="checkbox"/> Power of Attorney (____ pgs.)	
<input type="checkbox"/> Application - Provisional (____ pgs.)	<input type="checkbox"/> Preliminary Amendment (____ pgs.)	
<input checked="" type="checkbox"/> Assignment and Cover Sheet ( <u>3 pgs.</u> )	<input type="checkbox"/> Reply Brief (____ pgs.)	
<input checked="" type="checkbox"/> Certificate of Mailing	<input type="checkbox"/> Response to Notice of Missing Parts	
<input checked="" type="checkbox"/> Declaration & POA ( <u>4</u> pgs.) ( <u>signed</u> )	<input type="checkbox"/> Small Entity Declaration for Indep. Inventor/Small Business	
<input type="checkbox"/> Disclosure Docs & Orig & Copy of Inventor's Signed Letter (____ pgs.)	<input checked="" type="checkbox"/> Transmittal Letter, in duplicate <u>(2 pgs.)</u>	
<input checked="" type="checkbox"/> Drawings: <u>4</u> # of sheets includes <u>4</u> figures	<input checked="" type="checkbox"/> Fee Transmittal, in duplicate <u>(2 pgs.)</u>	
<input type="checkbox"/> Other: _____		

22387 U.S. PTO  
 10/734710

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[Foreign Associate: Alban Tay Mahtani & de Silva.  
 Ref. No.: CREA/20302993/KC/mt]